GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER				
TITLE: Medication Use: Prescribing, dispensing and	POLICY NO:	Page 1 of 5		
administering medication	AD-Pharma- 01			
RESPONSIBILITY: Pharmacy, Medication Clinic, Crisis Stabilization Unit & Residential				
Program				
APPROVED BY: DIFFECTOR	EFFECTIVE: APR 2 3 2018			
	LAST REVIEWED/REVISED:			

PURPOSE:

To identify GBHWC programs that use medication needed to promote recovery and outline process for consumers to obtain medication needed to promote recovery or desired treatment outcomes.

POLICY

- A. Guam Behavioral Health and Wellness Center handles, prescribe, dispense and administer medications to its consumer. It maintains a Pharmacy in the main facility which stores and controls the dispensing of all needed psychiatric medication to its consumers in accordance with governing local rules and regulations, State, national laws, and standards.
- B. The Pharmacist only dispense medication for GBHWC consumers prescribed by GBHWC Staff Psychiatrist or attending physicians with GBHWC privileges.
- C. Only Medication Clinic, Crisis Stabilization Unit and the Residential Program for both adult and Child Adolescent Services Division (CASD) administers the medication to its consumers and or allows self-administration of medication in their program.
- D. Safe handling of medication such as their proper preparation and labeling, transportation and administration follows appropriate safeguards recommended by the American Society of Health-System Pharmacists, the National Institute of Health, and the Occupational Safety and Health Administration.

DEFINITIONS:

<u>Medication Use:</u> is the practice of handling, prescribing, dispensing, and or administering medications to consumers in response to specific symptoms, behaviors, and conditions for which the use of medication is indicated and deemed efficacious. Medication use may include self-administration or be provided by personnel of GBHWC.

<u>Medication Control</u>: is identified as the process of physically controlling, transporting, storing, and disposing of medications, including those self-administered by the consumers.

<u>Medication Prescribing</u>: is evaluating, determining what agent is to be used by and giving direction to a consumer (or family or legal guardian).

<u>Self-Administration for Adults in the Residential Recovery Program and in Crisis Stabilization Unit:</u> The application of a medication (whether by injection, oral, inhalation or any other means) by the consumer to him/herself; and may include the Program/Unit storing the medication for the consumer, or may include staff handing the bottle or medication to the consumer, instructing or

verbally prompting the person served to take the medication, coaching the consumer through the steps to ensure proper adherence, and closely observing the consumer self-administering.

RESPONSIBILITIES:

<u>Pharmacist:</u> Handles, controls and dispense medication in the main facility for all GBHWC consumers. Checks accuracy, legibility, and completeness of the medication order or prescription. Prepares all medication with proper labeling and handling. Performs medication reconciliation and tracking. Provide instructions to consumer when picking up their medication.

<u>Psychiatrist:</u> Prescribes appropriate psychiatric medication and conducts medication education to consumers.

<u>Nurses:</u> Conducts medication management training to all direct service staff and self-administration instructions to consumers. Administers medication to consumers and completes the Medication Administration Record (MAR), and performs medication reconciliation.

PROCEDURE:

Medication Prescribing

- A. There must be evidence of a diagnosis, condition or indication for use on the medical record for each medication ordered by the physician that must be included in the overall treatment plan.
- B. A review of past medical history shall be conducted, including special dietary needs and restrictions, associated with medication use, and use of medications during pregnancy or by women of child bearing age and shall be documented prior to prescribing of new medication.
- C. A review of past medication use; medication effectiveness, side effects and allergies or adverse reactions as well as identification of alcohol, tobacco and other drug use, including over the counter medication shall be documented in the medical record.
- D. A medication order which includes medication name, dose, route, and frequency must be written legibly with no abbreviation on the Physician's Order Form, complete with the date, time, and the physician's signature. Telephone and Verbal Orders obtained by the Registered Nurse (RN) must be signed by the ordering physician prior to the end of the business day.
- E. Consent for Medication must be signed by the consumer or their legal guardian, with the exception of emergency medications where consumer and/or staff safety are at risk.
- F. Medication education must be provided by the prescribing physician prior to obtaining consent. All efforts must be made to encourage the consumer (family/guardian) to actively participate in their treatment including medication use.
- G. To be considered complete, all medication orders shall include:
 - 1. Name of drug
 - 2. Dosage and strength
 - 3. Quantity or duration as appropriate

- 4. Route and frequency of administration
- 5. Indication for usage (must be included with all PRN orders)
- 6. Time, Date, and Physician signature

H. Initiation of orders

- 1. Physicians shall write all medication orders on an original approved GBHWC physician's order form and/or prescription pad
- 2. Nursing staff shall check the completeness and clarify any ambiguous order before sending the order to the pharmacy.

I. Renewal of orders (Crisis Stabilization Unit)

- 1. Medication orders shall be renewed every seven (7) days, except for controlled medications which shall be renewed three (3) days after the order date.
- 2. Nursing staff shall inform the physician of expiring orders by placing a reminder sticker in the patient's medical record.
- 3. If the physician wishes to continue the drug therapy, he or she must write a new and complete medication order for this.
- J. Procedures for laboratory and other metabolic blood test monitoring shall be performed in accordance with establish practices in medicine.
- K. A staff psychiatrist/attending physician will be available for consultation regarding medications 24 hours a day, 7 days a week.

Medication Administration

A. Medication Clinic:

- 1. The nurse will use the floor stock medications and place ordered medication(s) into a medication cup.
- 2. The medication cup filled with ordered medication(s) will be offered to the consumer for self-administration.
- 3. For Injectable medications, the procedure for injections are to be followed:
 - a. Universal precautions including hand washing and use of gloves are adhered to between each consumer.
 - b. Needles and syringes are for single-use only.
 - c. Used needles and syringes are to be disposed of in sharps containers only.
- 4. Consumer will be instructed to remain in the clinic for 15-30 minutes for observation of any side effect(s)/adverse reaction(s).
- 5. The medication order must be transcribed on to a Medication Administration Record (MAR) to include the time, date and initial of the nurse who administered the medication(s)

B. Crisis Stabilization Unit

- 1. The nurse will place ordered medication(s) into a medication cup for self-administration. Floor stock will be used for new orders until pharmacy can dispense each medication order for a consumer.
- 2. For Injectable medications, the procedure for injections are to be followed:
 - a. Universal precautions including hand washing and use of gloves are adhered to between each consumer
 - b. Needles and syringes are for single-use only
 - c. Used needles and syringes are to be disposed of into sharps containers only

- 3. The medication cup filled with ordered medication(s) will be offered to the consumer for self-administration. Mouth check will be done to ensure medications are ingested properly.
- 4. The consumer will remain under observation of any side effect(s)/adverse reaction(s).
- 5. The medication order must be transcribed on to a Medication Administration Record (MAR) to include the time, date and initial of the nurse who administered the medication(s). The nurse will initial the consumer's MAR each time medication is administered.

C. Residential Recovery Program and CASD Serenity Home

Medication Administration and Documentation

- All consumers shall administer their own medication if possible. A
 registered nurse or licensed practical nurse (LPN) will be available to
 administer injectable, and other medications, at the direction of the
 prescribing physician if consumers are unable to administer their own
 medications.
- 2. Consumers receiving medication shall be instructed on self-administration, and medication management on a regular basis by nursing staff.
- 3. Consumers who administer their own medication as well as staff shall understand the importance of compliance, purpose of the medication, dosage times and possible side effects and know what to do if a dosage is missed, extra medication is taken or an adverse reaction is experienced.
- Consumers shall retrieve and take their medications pill box under the direct supervision of Residential staff except as specifically authorized by their treatment plan.
- 5. The level of medication management/monitoring will depend on the consumers' needs and consistency of their treatment plan. Staff will provide the appropriate supervision when consumers take their medication to ensure it is taken on time, in the correct amount and manner.
- 6. Mouth check will be done to ensure medications are ingested properly.
- 7. The use of over-the-counter (OTC) medications must be authorized by the consumers' physician, and the use of OTC medications documented on the Medication Administration Record (MAR).
- 8. Medications shall only be issued to the consumers for whom they were prescribed.
- 9. Staff shall not alter the dosage of medications prescribed unless directed to do so by the psychiatrist.
- 10. Staff shall document the consumers' compliance on the MAR sheet including: time and date, name of medication, amount or dose, initials of staff assisting, and any adverse reactions.
- 11. Staff shall assist the consumers, if needed, in reporting side effects to the psychiatrist or physician who prescribed the medication.
- 12. The staff will contact the Registered Nurse (RN) on duty at the child or adult inpatient unit (CIU/AIU) to receive authorization to assist consumers with PRN medication and document it properly; or when the consumers or staff has any questions about medications.
- 13. In the case of an emergency (overdose or adverse reaction), the staff will contact a physician (a Nurse in AIU if after office hours) immediately and follow their instructions. If this is not possible or the emergency is life threatening, staff must call 9-1-1 or go directly to the emergency room at Guam Memorial Hospital (GMH).

14. Any errors in medication must be properly reported and documented per GBHWC Incident Report Policy and Procedure.

REFERENCE(S):

CARF International. (2017). Medication Use. In *Behavioral Health Standards Manual* (pp. 134-139).

RELATED POLICY (IES):

SUPERSEDES: Title; Policy No.; Effective Date/signature date; Approving individual's name

RECEIVED BY

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GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER REVIEW AND ENDORSEMENT CERTIFICATION

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The signatories on this document acknowledge that they have reviewed and approved the following:

[x] Policy and Procedure	Submitted by: Nursing
[] Protocol/Form	Policy No: AD-Pharma-01
[] Bylaws	Title: Medication Use: Prescribing, dispensing and administering medication

	Date	Signature
Reviewed/Endorsed	Date	Signature
Title	Name Title	Shermalin Pineda
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	Date	Signature
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	Date	Signature
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